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Attorney Docket # WUR 50897/US/2 Page 1

OCT 1 3 2005 Appl. No.:

THE UNITED STATES PATENT AND TRADEMARK OFFICE

10/626,983

Applicants:

Joshi et al.

Filed:

July 25, 2003

Examiner:

Jeffrey Robertson

Art Unit:

1712

Title:

Pultrusion Systems and

Process

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Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION MAILED AUGUST 24, 2005

Dear Sir:

This paper is submitted in response to the Office Action mailed on August 24, 2005. Applicants respectfully submit the following amendments and remarks set forth below and request favorable action thereon.

Amendments to Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

10/626983

Application or Docket Number

WUR 50897/US/2_

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			34				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			34 minus 20=		* 14			X\$ 9≈		OR	X\$18=	252	
INDEPENDENT CLAIMS			minus 3 =		•			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	1002		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL I	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 16	Minus	** 3	4_	= Ø	L	X\$ 9=		OR	X\$18=		
	Independent	* D	Minus	***	3 CCI A114	= 7	1 L	X42=		OR	200 X84=	1,400,00	
	FIRST PRESE	NIAIION OF W	DETIPLE DEF	PENDEN	CLANVI		, [+140≈		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	1,400.0	
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST HBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=]]	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T (0) A 14.6	-	1 [X42=		OR	X84=		
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		」 [+140=		OR	+280=		
					. - (1)		L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	11	X\$ 9=		OR	X\$18=		
	Independent		Minus	444		-	11	X42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
.* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													